

United States Patent and Trademark Office
- Sales Receipt -

11/18/2005 AWISE1 00000001 061510 10647520

01 FC:1202 150.00 DA

NOV 14 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE ..

In re application of:

November 14, 2005

MICHAEL CHOI and AMIR KEYVANMANESH

Serial No. : 10/647,520

Group Art Unit: 2837

Filed : August 25, 2003

Examiner: Edgardo San Martin

For : NOISE ATTENUATION DEVICE FOR A VEHICLE EXHAUST
SYSTEM

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Fee Only

Sir:

AMENDMENT

In response to the Office Action dated August 24, 2005, please amend the above-identified application as follows:

Amendments to the Claims begin on page 2 of this paper.

Remarks begin on page 7 of this paper.

Page 1 - AMENDMENT

Serial No. 10/647,520; Record ID 81090077

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docket Number

10/647520

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	*
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

RATE	FEE
	\$
X \$	=
X \$	=
+ \$	=
TOTAL	

RATE	FEE
	\$
X \$	=
X \$	=
+ \$	=
TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))	24	Minus	21 = 3
Independent (37 CFR 1.16(b))	3	Minus	3 =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

RATE	ADDITIONAL FEE
X \$25 =	
X \$100 =	
+ \$180 =	
TOTAL ADD'L FEE	

RATE	ADDITIONAL FEE
X \$50 =	150
X \$200 =	
+ \$360 =	
TOTAL ADD'L FEE	150

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))		Minus	=
Independent (37 CFR 1.16(b))		Minus	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDITIONAL FEE
X \$25 =	
X \$100 =	
+ \$180 =	
TOTAL ADD'L FEE	

RATE	ADDITIONAL FEE
X \$50 =	
X \$200 =	
+ \$360 =	
TOTAL ADD'L FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))		Minus	=
Independent (37 CFR 1.16(b))		Minus	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDITIONAL FEE
X \$25 =	
X \$100 =	
+ \$180 =	
TOTAL ADD'L FEE	

RATE	ADDITIONAL FEE
X \$50 =	
X \$200 =	
+ \$360 =	
TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.